Pat B - FEE(S) TRANSMITIAL

end this form, together with applicable fee(s), to: Mail

Mail S op ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (703) 7:45-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION HEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)

7590

07/14/2004

Sanchelima and Associates, P.A. Jesus Sanchelima, Esq. 235 S.W. Le Jeune Rd. Miami, FL 33134

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Trensmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby entify that this Fee(s) Transmittal is being deposited with the United States Pos 1 Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. RENDES (Depositor's name)

(Signature 7/8/04 (Date) FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. Abclardo Caraballo

230376

10/765,333 01/28/2004 TITLE OF INVENTION: POOL CLEANER CONTROL DEVICE

FILING DATE

APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION		TOTAL FE	E(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0			\$665		10/14/2004
CXAMINER		ART UNIT		CLASS-SUBCL	SS	7		
PRINCE, FRED G		1724		210-16900)		_		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1,363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page, list (1) the names of up to 3 regisered patent attorneys of agents OR, alternatively,					
Address form P3 O/SB/122) attached. □ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (Living as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3			2 <i>A. B.</i>	ORDAS	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. It is assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

APPLICATION NO.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not b	e printed on the patent);					
4a. The following fee(s) are enclosed:	4b. Payment of Fcc(s):					
□ Issue Fee	$\Box \Lambda$ check in the amount of the fexis) is enclosed.					
Publication Fee (No small entity discount permitted)	@ Payment by credit card. Form PIO-2038 is attached.					
□ Advance Order - # of Copies	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19 - 2729 (enclose an extra copy of this form).					
5. Change in Entity Status (from status indicated above)	(Citchose all extra copy of this form).					
a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27.	□ b. Applicant is not claiming SM ALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).					
The Director of the USPTO is requested to apply the Issue Fee and Publi	ication For (if an)					
interest as shown by the records of the United States Patent and Tradem	neadon ree (if any) or to re-apply any previously paid issue fee to the application identified above, pited from anyone other than the applicant; a registered attorney or agent; or the assignce or other party in ark Office.					
(Authorized Signature)	17104					
This collection of information is a second to the second t						
this form and or improved apprication form to the USPIO. Time will ve	ation is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) R 1.14. This coolection is estimated to take 12 minutes to complete, including gathering, preparing, and sty depending upon the individual case. Any comments on the amount of time you require to complete the Chief Information Officer, U.S. Pitent and Trademark Office, U.S. Department of Commerce, P.O. R COMPLETED FORMS TO THIS ACORESS. SEND TO: Commissioner for Patents, P.O. Box 1450.					

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMIT THIS FORM WITH FEE(S)

PTOL-85 (Rev. 07/04) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PAGE 2/4 * RCVD AT 9/7/2004 4:08:25 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-2/2 * DNIS:7464000 * CSID:3054458484 * DURATION (mm-ss):02-06 09/08/2004 ANDNDAF2 00000091 10765333

Serial No. 10/765,333

SEP 0 7 2004

THE UNITED STATES PATENT AND TRADEMARK OFFICE

pplication of:

Date: September 7, 2004

Abelardo Caraballo

Serial No: 10/765,333

Filed: January 28, 2004

Atty. Dkt. No. 230376

Title: "POOL CLEANER CONTROL DEVICE"

ISSUE FEE

CERTIFICATION OF FACSIMILE TRANSMISSION

I HEREBY CERTIFY that this paper is being facsimile transmitted to the U.S. Patent & Trademark Office on <u>September 7, 2004</u>. I have been warned that willful false statements and the like are punishable by fine or imprisonment, or both (18 U.S.C. 1001) and may jeopardize the validity of this application, document, registration or patent resulting therefrom.

Vicky Prendes, Patent Department

(Printed name of the person signing the certificate)

(Signature of the person signing the certificate)

FROM:

SANCHELIMA & ASSOCIATES, P.A.

235 SW Le Jeune Road, Miami, Florida 33134

Ph:(305)447-1617 Fax:(305)445-8484

TO:

Commissioner for Patents

Attn.

Mail Stop: ISSUE FEE

Fax No.

(703)746-4000

Hon. Commissioner:

Enclosed please find the duly executed PART B-ISSUE FEE TRANSMITTAL for the above referenced matter. A credit card authorization form (PTO-2038) to cover the issue and publication fees is enclosed. The Commissioner is hereby authorized to charge any outstanding deficiency for the issue and publication of the referenced patent or credit any overpayment to Deposit Account No. 19-0129. A duplicate copy of this sheet is enclosed for your accounting purposes.

Also, please note that we have sent the drawings corrections required in the Notice of Allowability to the Official Draftsperson. We enclose a copy of the corrected formal drawings filed. Please notify us of any other outstanding matter.

Vicky Prendes, Patent Department SANCHELIMA & ASSOC., P.A.

file: XIssue Fee-PTO

J5/vp

Encl: PTOL-85